

Civil Action No. 1:25-cv-01529

PROOF OF SERVICE*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for *(name of individual and title, if any)* U.S. Department of Agriculture
 was received by me on *(date)* 2/25/2025.

☐ I personally served the summons on the individual at *(place)* _____
 _____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
 _____, a person of suitable age and discretion who resides there,
 on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
 designated by law to accept service of process on behalf of *(name of organization)* _____
 _____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☒ Other *(specify)*: I served the U.S. Department of Agriculture by serving the U.S. (see below) and by mailing a copy of the summons and complaint by USPS certified mail to the U.S. Department of Agriculture on 2/26/2025. Please see the attached USPS receipt, showing delivery address, and return receipt, showing the summons and complaint were received 3/5/2025.

My fees are \$ 0.00 for travel and \$ 0.00 for services, for a total of \$ 0.

I declare under penalty of perjury that this information is true.

Date: 3/27/2025

Amy Yoon
Server's signature

Amy Yoon, Litigation Assistant
Printed name and title

48 Wall St., 15th Fl.
 New York, NY 10005

Server's address

Additional information regarding attempted service, etc:

I served the United States by (1) mailing a copy of the summons and complaint by USPS certified mail to the Attorney General of the United States on 2/26/2025, which was received on 3/3/2025; and (2) mailing a copy of the summons and complaint by USPS certified mail to the Civil Process Clerk of the U.S. Attorney's Office for the Southern District Court of New York on 3/26/2025, which was received on 3/27/2025. Please see the attached USPS receipts, showing delivery addresses, and return receipts, showing when the copies were delivered.

Print

Save As...

Reset

U.S. Postal ServiceTM
CERTIFIED MAIL RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com.

Washington, DC 20250

Certified Mail Fee \$4.85

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$19.15

Total Postage and Fees \$28.10

Sent To U.S. Department of Agriculture
Street and Apt. No., or PO Box No. Whitten Bldg, 1400 Independence Ave. SW
City, State, ZIP+4® Washington, D.C. 20250

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

9589 0710 5270 1906 4910 0

NEW YORK NY
FEB 26 2025
Postmark Here
02/26/2025
NEW YORK NY

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

office of General Counsel
U.S. Department of Agriculture
Room 107W, Whitten Bldg.
1400 Independence Ave., SW
Washington, D.C. 20250



9590 9402 8645 3244 2136 88

2. Article Number (Transfer from service label)

9589 0710 5270 1906 4910 05

COMPLETE THIS SECTION ON DELIVERY

A. Signature

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

David White

C. Date of Delivery

3/5/25

- D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below. ☐ No

RECEIVED BY

MAR - 5 2025

DLW - OGC

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Mail
Mail Restricted Delivery
(0)

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

9589 0710 5270 1906 4909 9

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

Washington, DC 20530

Certified Mail Fee	\$4.85
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$3.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$19.15
Total Postage and Fees	\$28.10

Postmark Here
NEW YORK NY
FEB 26 2025

Sent To
Pamela Bondj, U.S. Department of Justice
Street and Apt. No., or PO Box No.
950 Pennsylvania Ave., NW
City, State, ZIP+4®
Washington D.C. 20530-0001

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p><i>Pamela Bondi</i> <i>Attorney General</i> <i>U.S. Department of Justice</i> <i>950 Pennsylvania Ave., NW</i> <i>Washington, D.C. 20530-0001</i></p> <p> 9590 9402 8645 3244 2137 01</p> <p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 1906 4909 92</p>		<p>A. Signature <i>Ely Lane</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X</p> <p>B. Received by (Printed Name) <i>MAR 6 3 RECD</i> C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p> <p>INSPECTED 28</p> <p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery (00)</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

9589 0710 5270 1906 4909 70

U.S. Postal Service™ CERTIFIED MAIL RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
New York, NY 10007	
Certified Mail Fee \$4.85	0070 29
\$	\$0.00
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ \$1.85
<input type="checkbox"/> Return Receipt (electronic)	\$ \$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ \$0.00
<input type="checkbox"/> Adult Signature Required	\$ \$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ \$0.00
Postage \$11.80	Postmark Here 03/26/2025
\$	
Total Postage and Fees \$19.27	
Sent To Civil Process Clerk, US Atty's Office for SDNY Street and Apt. No., or PO Box No. 86 Chambers St. 3rd Fl. City, State, ZIP+4® New York, NY 10007	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	



March 27, 2025

Dear Amy Yoon:

The following is in response to your request for proof of delivery on your item with the tracking number:
9589 0710 5270 1906 4909 78.

Item Details

Status:	Delivered, Front Desk/Reception/Mail Room
Status Date / Time:	March 27, 2025, 9:18 am
Location:	NEW YORK, NY 10007
Postal Product:	Priority Mail®
Extra Services:	Certified Mail™ Return Receipt Electronic Up to \$100 insurance included

Shipment Details

Weight: 3lb, 11.0oz

Destination Delivery Address

Street Address: 86 CHAMBERS ST FL 3
City, State ZIP Code: NEW YORK, NY 10007-2632

Recipient Signature

Signature of Recipient:	USMS USMS
Address of Recipient:	86 Chamber St #3rd

Note: Scanned image may reflect a different destination address due to Intended Recipient's delivery instructions on file.

Thank you for selecting the United States Postal Service® for your mailing needs. If you require additional assistance, please contact your local Post Office™ or a Postal representative at 1-800-222-1811.

Sincerely,
United States Postal Service®
475 L'Enfant Plaza SW
Washington, D.C. 20260-0004